

Lincoln Police Department Thomas K. Casady, Chief of Police 575 South 10th Street Lincoln, Nebraska 68508

402-441-7204 fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

November 2, 2006

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Center Stage & Salon, Spa & Tanning, 4001 Pioneer Woods Drive requesting a class C liquor license.

Percy Upton, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Percy Upton was born in Norfolk, Nebraska. He attended Clarks High School graduating in 1978.

Mr. Upton had been self employed for the past 25 years.

Stockholder information, and criminal histories have been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police





Liquor License Investigation
Business (DBA) CENTER STAGE
Manager Owner Other
Name: Percy UPTON
US Citizen? Yes No
Has applicant ever been cited for liquor law violations? No Yes  Explain
Does applicant have an interest in another liquor license? No Yes  Explain
Is spouse qualified to hold a license ? Yes No N/A
How is applicant if not an owner to be paid? Salary Hourly
How many hours will applicant be at the establishment? 65+
Any other employment ? No Yes, explain
Any previous experience with a liquor license? Yes (No)
Any criminal convictions? Yes  Comments See ATTIA Const.
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? No Yes  Comments
(4) Photo (4) Records Check (4) References
Comments
Interview Date 11 / 2 / 66

Liquor License Business Report Completed by Inv. Fosler #843
Business Name: Center STAge
Address: 4001 Promes worls Phone: 486-3116
Type of Investigation: Purchase Upgrade Expansion New
Owner Manager Other:
Type of Business: SAION /SPA
Liquor Class A B D I J K Catering Other:
Ownership: Corporation Partnership Individual
Amount Financed: 75,000 Source: BANK
Lease Agreement: 994R 9000
Sales: %Feed: 90 %Liquor: 10
Located: Commercial Industrial Residential
Traffic Flow: modern te Off Street Parking: Yes No
Ready for Operation: Yes No/Est Date: Dec 06
Food Service: Yes No Employees: F/T 28 P/T 10
Est Seating: Est Daily Customers
Hours of Operation: M-Thir 9-1- 9 pm 9-7 Fri 9-5-5-8 12-5 sor
Any Additional Comments:

STATE OF NEBRASKA

OCT 2 4 2006



## CITY CLERK'S OFFICE LINCOLN, NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION Hobert B. Rupe

Executive Director 301 Centennial Mall South, 5th Floor

> P.O. Box 95046 Lincoln, Nebraska 68509-5046 Phone (402) 471-2571 Fax (402) 471-2814

TRS USER 800 833-7352 (TTY) web address: http://www.lcc.ne.gov/

October 23, 2006

City Clerk of Lincoln City/County Building 555 S 10 Street Lincoln, NE 68508

Dear Local Governing Body:

A6-116514

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

# TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- Publicize one time not less than 7 days not more than 14 days prior to date of hearing. 1)
- You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-2) 134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body. 1)
- 2) A citizens protest; or
- Statutory problems that the Commission discovers. 3)

PLEASE NOTE A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS, AND A LICENSE IS EFFECTIVE:

- Upon payment of the license fees; 1)
- Physical possession of the license; 2)

Effective date on the license. 3)

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Jackie B. Matulka Licensing Division

Enclosures<sub>Rhonda</sub> R. Flower Commissioner

**Bob Logsdon** 

Chairman

R.L. (Dick) Coyne Commissioner

CLASS C

local 74746

not hospital certificate.

receved

## LICENSE APPLICATION CHECKLIST

CIT Of anna
Applicant Name Center Stage & Salon, Spat Tanning, Inc. Telephone # 402-486-3116
Trade Name Previous Trade Name Previous Trade Name
Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. Your operation depends on receiving a liquor license the Nebraska Liquor Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. All applications & attachments must be submitted in triplicate. You may want to check with the city/village or county clerk, where you are making application, to see if any additional local requirements must be met before submitting application to the state.
REQUIRED ATTACHMENTS
EACH ITEM MUST BE CHECKED OFF AND INCLUDED OR MARKED N/A FOR NOT APPLICABLE
1. Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of \$38.00 for each person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to a Nebraska State Patrol Agency or law enforcement agency listed in the fingerprint brochure.
2. Enclose registration and license fees for the appropriate class of license, made out to the Nebraska Liquor Control Commission.
2. Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate LLC License - Form 3a and Manager application - Form 3b(with corporate application only). LLC application must include all members.
4. If building is being leased send a copy of the lease. Be sure it is in the individual(s) or corporate name being applied for. Also, the lease must exte nd through the license year being applied for. If building is owned, sen d a copy of the deed or purchase agreement in the appropriate name.
5. If you are buying the business of a current licensee, provide a copy of the purchase agreement from licensee.  This also needs to be in applicant's name.
6. Enclose a copy of the temporary agency agreement, if applicable. Must be on Commission form only. Include a copy of the signature card from the bank showing both the sellers and buyers name(s) on account.
77. Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes.  Inventory may be taken at the time application is being submitted.
8. Enclose a list of any inventory or property owned by other parties that are on the premise.

For individual and partnership applications enclose proof of citizenship birth certificates, or naturalization documents for all persons listed on application. Documents must be a certificate from the State, where born,

10.If a corporation enclose a copy of the articles of incorporation. This document must show receipt (barcode) by the Secretary of States Office.

Mail checklist, all applications and attachments to: Nebraska Liquor Control Commission, 301 Centennial Mall South, PO Box 95046, Lincoln NE 68509-5046

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.

Signature Signature

fiecewed

GGT 0 6 2008

NEBRASKA LIGUOR CONTROL CONDISSION

# APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: www.lcc.ne.gov



037 0 6 2008

NEBRASKA LIGIGA CONTROL CONTESTAN

OFFICE USE ONLY

CHECK DESIRED CLASS(S)			
RETAIL LICENSE(S)	Φ.	45.00	
A Beer, On Sale Only B Beer, Off Sale Only		45.00 45.00	
C Beer, Wine & Distilled Spirits, On & Off Sale	-	45.00 45.00	
D Beer, Wine & Distilled Spirits, Off Sale Only	\$45.00 \$45.00		
Beer, Wine & Distilled Spirits, On Sale Only  Beer, Wine & Distilled Spirits, On Sale Only		45.00 45.00	
Class K Catering license may be added to any of these classes			
of \$100.00 and filing form 35-4202	with an at	iditional fee	
MISCELLANEOUS	CONTROL CONTRO	Bond	
L Craft Brewery (Brew Pub)	\$295.00	1,000 min.	
O Boat	\$ 95.00	N/A	
V Manufacturer, Beer, Wine & Distilled Spirits	\$ 45.00	10,000 min	
(additional fee of \$100 to \$1,000-call for exact amount)			
Wholesale Beer	\$545.00	5,000 min.	
X Wholesale Liquor	\$795.00	5,000 min.	
Y Farm Winery	\$295.00	1,000 min.	
All Class C licenses expire October 31st	tin (* vilk in Private), er en en skareter konk germane Akie en een	The latest the service of the section of the sectio	
All other licenses expire April 30 <sup>th</sup>			
Catering expire same as underlying retail license	ONTEN		
TYPE OF APPLICATION BEING APPLIED FOR (CHECK Individual License, requires insert form 1	ONE)		
Partnership License, requires insert form 2			
Corporate License, requires insert form 3a and manage	ar annliaa	tion 2h	
Z	ст арриса	1011 31	
	ATION		
NAME OF PERSON OR FIRM ASSISTING WITH APPLIC			
Commission will call this person with any questions we may have)			
NAME OF PERSON OR FIRM ASSISTING WITH APPLIC. (Commission will call this person with any questions we may have) Name: Thomas A. Emecton Phone: 308	-38a-	-2128	
(Commission <u>will call</u> this person with any questions we may have)  Name: Thomas A. Emecton Phone: 308	-38a-	-2128	
(Commission <u>will call</u> this person with any questions we may have)  Name: Thomas A. Emecton Phone: 308	-38a-	-2128 7	
Commission will call this person with any questions we may have)  Name: Thomas A. Emecton Phone: 308	-38a- nderse	-2128 <u>7                                    </u>	

PREMISE INFORMATION Trade Name (doing business as) <u>Center Stage &amp; Salon, Spa &amp; Tanning</u> ,
Street Address #1 400/ Proneer Woods Dr.
Street Address #2
city Lincola county Lancaster
Zip Code 68500
Telephone number at premise to be licensed 402-486-3116
Is this location inside the city/village corporate limits:   YES  NO
Mail to Address (where you want receipt of Liquor Control Commission mailings)  Name: Pete: Nicole Upton  Street Address #1 PO BOK 548
Street Address #2
city Grand Island county Hall
Zip Code
DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED  In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only

See attached

APPLICANT INFORMATION 1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name. If yes, please explain below or attach a separate page. X Yes No See attached FECRIVED. CET 0 d 2008 NEBRASKA LICUUM Are you buying the business and/or assets of a licensee? If yes, submit a copy of 2. the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted. Current business name and license number X Are you filing a temporary agency agreement, Commission form 4231, whereby 3. current licensee allows you to operate on their license. If yes, attach agreement. Please note: This agreement is not effective until Commissions assigns you a 3digit ID number. Yes M No

Are you borrowing any money from any source to establish and/or operate the

Ves State Bank of Cairo in Cairo, NE

4.

X

No

business? If yes, list the lender.

5.	Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.				
$\boxtimes$	YesNo				
6.	Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.				
	Yes				
$\boxtimes$	No				
7.	Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners)  Yes				
	No				
8.	Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177.  Yes				
	No				
9.	Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.  Yes No				
10.	List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.  State Bank of Carro in Cairo, NE				
11.	List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held. $WA - \eta O \eta C$				



007 0 6 2006

13.	estimated number of hours per week such per premises supervising operations.  Percy Upton – (a)  List the training or experience (when and who in connection with selling and/or serving alco	eson or manage	er will be or	i the	Carting Control of the
14.	If the property for which this license is sough deed, or proof of ownership. If leased, submit entire license year. Documents must show tit as owner or lessee in the individual(s) or corp is being filed.  Lease: expiration date  Deed  Purchase Agreement	it a copy of the tle or lease hel	lease cove d in name o	ring the f applicant	
15.	When do you intend to open for business? $\overline{\underline{\lambda}}$	Decembe	er l, a	2006	
16.	What will be the main nature of business? What will be the main nature of business? What operation?  Monda  Lon ? Spa Services Sund	hat are the anti y - Satur ay 7,007	cipated hou day	9a-10p	ro
17.	List the principal residence(s) for the past 10 application, including spouses. If necessary	attach a separa	te sheet.		
Applie	cant Name	From: Year	To: Year	City/State	مصدرة الأستاد
Perc	y Upton-27210 St. Patrick Ave. Grand Island, NE 6860	1 <b>9</b> 96 3	2006	GrandI	sland, NE sland, <b>N</b> E
Nico	lle Upton-2726 St. Patrick Ave. Grand Island, NE 16880	. 1996 3	2000	CorandI	sland, <b>N</b> E
	A PAGE PAGE PAGE PAGE PAGE PAGE PAGE PAG				

List the person who will be the on site supervisor of the business and the CA LIGUOR

12.

The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

RECEIVED

007 0 6 2006

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full (birth) names only, no initials.

Fina Ot		
(sign here)	(sign here)	

Subscribed in my presence and sworn to before me this

day of October, 2004

Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010 REV. 4/05



#### ARTICLES OF INCORPORATION



OF

OGT 0 6 2008

CENTER STAGE & SALON, SPA & TANNING, INC.

NEGRASKA LIQUOR CONTROL COMMISSION

The undersigned, Thomas A. Emerton, a natural person of majority age, acting as Incorporator of a corporation under the Nebraska Business Corporation Act, adopts the following Articles of Incorporation for such corporation:

#### ARTICLE I.

The name of the corporation is Center Stage & Salon, Spa & Tanning, Inc..

#### ARTICLE II.

The duration of the corporation shall be perpetual.

#### ARTICLE III.

The purposes and objects for which the corporation is organized is:

- (a) To provide retail salon, spa and tanning services and the sale of associated supplies; and
- (b) To engage in any lawful act or activity for which corporations may be organized under the laws of the State of Nebraska and which are not forbidden by these Articles of Incorporation.

#### ARTICLE IV.

The corporation shall have and exercise all powers and rights conferred upon corporations by the Nebraska Business Corporation Act and any enlargement of such powers conferred by subsequent legislative acts; and, in addition thereto, the corporation shall have and exercise all powers and rights, not otherwise denied corporations by the laws of the State of Nebraska, as are necessary, suitable, proper, convenient or expedient to the attainment of the purposes set forth in Article III above.

#### ARTICLE V.

The aggregate number of shares which the corporation shall have authority to issue is 10,000 shares of common stock, and the par value of each such share shall be \$1.00.

#### ARTICLE VI.

In the absence of fraud, no contract or other transaction between the corporation and any other person, corporation, firm, syndicate, association, partnership, or joint venture, shall be wholly or partially invalidated or otherwise affected by reason of the fact that one or more directors of this corporation are or become directors or officers of such other corporation, firm, syndicate or association or member of such partnership or joint venture, or are pecuniarily or otherwise interested in such contract or transaction, provided, that the fact such director or directors of this corporation are so situated or so interested or both, shall be disclosed or shall have been known to the Board of Directors of this corporation. Any director of the corporation who is also a director or officer of such other corporation, firm, syndicate, or association, or member of such partnership or joint venture or is pecuniarily or otherwise interested in such contract or transaction, may be counted for the purpose of determining the existence of a quorum at any meeting of the Board of Directors which shall authorize any such contract or transaction, and in the absence of fraud and as long as he acts in good faith, any such director may vote thereat to authorize any such contract or transaction with like force and effect as if he were not a director or officer of such other corporation, firm, syndicate or association or a member of such partnership or joint venture or pecuniarily or otherwise interested in such contract or transaction. No director or directors having such disclosed adverse interests shall be liable to this corporation or to any stockholder or creditor thereof or to any other person for any loss incurred by this corporation under or by reason of any such contract or transaction, nor shall any such director or directors be accountable for any gains or profits realized thereon.

#### ARTICLE VII.

This corporation reserves the right to amend, alter, change or repeal any or all provisions contained in these Articles of Incorporation in the manner now or hereafter prescribed by statute, and all rights conferred upon stockholders herein are granted subject to this reservation.

#### ARTICLE VIII.

The street address of the initial registered office of the corporation is 211 West Third Street, Grand Island, NE 68801, and the name of the initial registered agent at such address is Percy L. Upton.

# ARTICLE IX.

The Incorporator's name and street address is Thomas A. Emerton, 202 West Third Street, 4th Floor, P.O. Box 639, Grand Island, NE 68802.

EXECUTED THIS 7th day of August, 2003.

Thomas A. Emerton,

Incorporator



# APPLICATION FOR LIQUOR LICENSE CORPORATION MANAGER - FORM 3b \*MUST BE A NEBRASKA RESIDENT\*

301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: http://www.lcc.ne.gov/



Website: http://www.lcc.ne.gov/
LIQUOR LICENSE INFORMATION
NAME OF LICENSED CORPORATION CENter Stage & Salon, Spa : Tanning, Inc. class & License Number Class "C" (License Number pending Application)
CLASS & LICENSE NUMBER Class "C" (License Number pending Application)
TRADE NAME NAME
STREET ADDRESS 4001 PROPER Woods Dr. CITY LINCOLD, NE 685010
Gulpto
SIGNATURE OF CORPORATION PRESIDENT/CEO
APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)
NAME Percy C. Upton
ADDRESS 2726 St. Patrick Ave.
CITY Grand Island STATE NE ZIP CODE 68803
HOME PHONE NUMBER 308 - 380 - 1028 BUSINESS PHONE NUMBER 402 - 486 - 3116
SEX MALE FEMALE SOCIAL SECURITY NUMBER
DATE OF BIRTH NOYOR, NE
DRIVERS LICENSE NUMBER & STATE NEBRASKA,
SPOUSES INFORMATION (IF NOT MARRIED INDICATE)
SPOUSE NAME Nicolle Upton
SOCIAL SECURITY NUMBER DATE OF BIRTH
DRIVERS LICENSE NUMBER & STATE DE L'ARREST NEBRASKA

				0.7	0 0 2006	
1. READ CAREFULLY. ANSWER CO Has anyone who is a party to this application, or the charge alleging a felony, misdemeanor, violation of of the charge, where the charge occurred and the yeapplication. If more than one party, please list char  YES NO If yes, please explain below or attach a sep  See attached.	eir spouse f a federal ear and m ges by ea	e, EVER to state I on the of the onth of t	neen convicted of or plead guilty to a aw; a violation of a local law, ordina c conviction or plea. Also list any c	ance or res	solution. Li	ist the nature
2. Have you or your spouse ever made application license number and date.  YES  NO	for any li	quor licen	se or manager for any liquor license	? IF YES	S, for what p	oremise give
3. Have you or your spouse ever made a compromi  ☐YES  ☐NO	ise settlen	nent for v	iolation of such laws?			
4. Do you, as a manager, have all the qualifications Nebraska Liquor Control Act (§53-131.01)  YES  NO	s required	by any p	erson entitled to hold a Nebraska Lic	quor Licer	ise?	
5. Have you filed fingerprint cards and <b>PROPER I</b> ▼YES □NO	FEES (if	check, ma	ake out to the NE State Patrol), with	this appli	cation?	
RESIDENCES FOR THE PAS	ST 10 YE	ARS, AF	PLICANT AND SPOUSE MUST	COMPL	ETE	
APPLICANT: CITY & STATE	YE. FROM	AR TO	SPOUSE: CITY & STATE		YE FROM	AR TO
Percu Upton	1996	2004	Nicolle Upton		1996	2006
2726 St. Patrick Ave.			2726 St. Matrick	Ave.		
Grand Island, NE/08803			Grand Island, N	C		-
,			68	803	ENERG INTERNATION	
EMPLO	YERS -	LIST LA	ST TWO EMPLOYERS			(1) William 1

MONTH/YEAR M TO

FROM

NAME OF EMPLOYER

NAME OF SUPERVISOR

TELEPHONE NUMBER



RADAGILLAND

#### PERSONAL OATH AND CONSENT OF INVESTIGATION MUST BE SIGNED BY APPLICANT & SPOUSE

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penaltics provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

Signature of Applicant

Subscribed in my presence and sworn to before me this \_ day of \_OCTODEL\_, 2006\_\_\_.

64h

Subscribed in my presence and sworn to before me this day of \_\_CCTODEC\_, 200(e).

Notary Signature & Scal

GENERAL NOTARY - State of Nebraska KATHERINE SEDLACEK My Comm. Exp. Oct. 7, 2009

GENERAL NOTARY - State of Nebraska KATHERINE SEDLACEK My Comm. Exp. Oct. 7, 2009

Notary Signature & Seal

# APPLICATION FOR LIQUOR LICENSE CORPORATION/LLC INSERT - FORM 3a

NEBRASKA LIQUOR CONTROL COMMISSION 301 CENTENNIAL MALL SOUTH PO BOX 95046 LINCOLN, NE 68509-5046 PHONE: (402) 471-2571 FAX: (402) 471-2814 Website: http://www.lcc.ne.gov/



Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office.
Center Stage: Salon, Spa: Tanning, Inc.
Corporate Street Address: 4001 Proneer Woods Dr.
City: Lincoln State: NE Zip Code: LOS SYLO
Corporate Telephone Number 402-486-3116
Total number of shares issued (if corporation) 2,000
Is this a Non Profit Corporation?
Name of Registered Agent Percy L. Upton
Name of Registered Agent <u>Percy C. Upton</u> , <u>Nicolle M. Upton and</u> This person must complete form 35-4013  Robin M. Doyle
List name of Chief Executive Officer
Last Name: Leton First Name: Percy MI C.
Last Name: Upton First Name: Percy MI C.  Address Street 2726 St. Patrick Hycity Grand Island
State NE Zip Code <u>18803</u> Home Phone number
Social Security Number Date of Birth

List names of all Officers, Directors, Stockholders, Members and their Spouses Last Name Up ton First Name PECCO Social Security Number Date of Birth Title President Director Shareholder Number of Shares 1,000 Spouse Name (indicate N/A if single) Nicolle Upton Spouse Social Security Number Date of Birth Title Secretary Treasurer, Sirector: Stareholder Number of Shares Last Name First Name Social Security Number\_\_\_\_\_\_ Date of Birth\_\_\_\_\_ Title Number of Shares Spouse Name (indicate N/A if single)\_\_\_\_\_ Spouse Social Security Number \_\_\_\_\_\_ Date of Birth Title Number of Shares Last Name First Name Social Security Number \_\_\_\_\_ Date of Birth\_\_\_\_ \_\_\_Number of Shares Title Spouse Name (indicate N/A if single)\_\_\_\_\_ Spouse Social Security Number \_\_\_\_\_ Date of Birth Title Number of Shares

Is this Corporation or Limited Liability Company controlled by Yes No If yes, give name of corporation and supply organizational chart	•
Indicate tax year with the IRS Starting Date Ganuacy Ending Date E	Secember 31st
Signature of President/Managing Member	
Jatherine Sedlacell	GENERAL NOTARY - State of Nebraska KATHERINE SEDLACEK My Comm. Exp. Oct. 7, 2009
Notary Public Signature & Seal	
Subscribed in my presence and sworn to before me this day of October, 2006	
Notary Public Signature & Seal	GENERAL NOTARY - State of Nebraska KATHERINE SEDLACEK My Comm. Exp. Oct. 7, 2009

In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

p.1

Percy L. Upton P.O. Box 5681 Grand Island, NE 68802

Nicolle Upton

Date October 10, 2006

Jackie Matulka Nebraska Liquor Control Commission 301 Centennial Mall South, 5th Floor Lincoln, NE 68509-5046

Dear Jackie Matulka

I have attached Nebraska State Patrol report for Nicolle Upton and myself. In our first initial research on ourselves certain items were not found in the Nebraska Trail Courts Case Search System.

The following items have been verified based on our further research:

Nicolle (Hubel - Maiden name) Upton had a previous DUI and Minor in Possession in August of 1991. Guilty by conviction.

May of 1993: Percy Upton had a 3rd Degree Assault (DOM VIOL). Dismissed.

The following items were also not found in my research and I have attached them and describe the to the best of ability based on the time frame that has elapsed:

Percy Upton: In 1978 I was attending a party a UNL and was cited for disturbing the peace and possibly another charge. I do not recall the offense or the situation due to the time that has lapsed. It did not show up on my research.

Percy Upton: In 1980 I had a driving infraction that did not show up in my research. I believe the situation was at 10th & P Street. I was following a girl to a event and she stopped in front of me and I hit her car. She had a piece of rubber from the bumper fall off. We both agreed she knew who I was and I knew who she was any damage I would take care of it. Later she filed a report with the Lincoln Police Department and I was cited with leaving the scene of an accident, failure to report an accident, and running a red light.

Percy Upton: In 1980 I rented a apartment while going to UNL and the pilot light on the stove went out, I was taken to the hospital, and later it was ruled accidentally. At the time it was investigated by the Lincoln Police Department. It was found the stove was at fault.

#

In my research I was not able to find any other items on the Criminal Investigation. In regards to driving violation to the best of my ability all items are listed.

The Misdemeanors filed on Percy L. Upton and Nicolle Upton found in our first initial research were dismissed:

The (3) Misdemeanors filed on 1/24/2006 on Percy Upton were dismissed by the Prosecutor. Verified on the report submitted to you on October 6, 2006. The (1) Class 1 Misdemeanor DOM VIOL on 3/19/1998 Nicolle Upton was dismissed by the Prosecutor. Verified on the report submitted to you on October 6, 2006

To the best of our ability we feel the that our Criminal History Report are accurate.

Sincerely

Percy L. Upton



# Nebraska State Patrol CID Receipt

Record Check for Non-Criminal Record Request

Created On	Amount	Payment Type		Check Number 20186	Receipt Number N5126134	
10/06/2006 \$30.00		Check				
Received Fr	rom:			I be delivered to:	OLL E LIDTON	
Company:	CENTER STAGE SALON SPA & TANNING		Company:	PERCY & NICOLLE UPTON		
Name:			Name:	2700 OT DATE	DICK AVE	
Address:	PO BOX 5681		Address:	2726 ST PATRICK AVE		
City/State/Zip:	GRAND ISLAND, NE 68803		City/StateZir	- ZAK		
	(308) 380-1028		Phone:			

Comments:



### Nebraska State Patrol

# Criminal History Record Dissemination Form

CRIMINAL HISTORY									
UPTON, NICOLLE			D.O.B.	05/01/1971					
508171510			Complete Date	10/06/2006					
REQUESTING AGENCY/INDIVIDUAL									
PERCY & NICOLLE UPTON									
2726 ST PATRICK AV	ATRICK AVE								
GRAND ISLAND, NE	AND ISLAND, NE 68803								
(See Attached Nebraska Rap Sheet)									
Additional Aliases Checked:									
	SSN								
HUBEL		418962							
				,					
NAME CHECK ONLY: Positive Identification cannot be effective without the support of finger print. NEBRASKA STATE PATROL									
NSP Receipt #:N5126134									
NOTE: TRAFFIC INFRACTION DATA AVAILABLE FROM: NEBRASKA STATE DEPARTMENT OF MOTOR VEHICLES P.O. BOX 94789			NEBRASKA STATE PATROL RECORDS & IDENTIFICATION DIVISION P.O. BOX 94907 LINCOLN, NEBRASKA 68509-4907						
	PERCY & NICOLLE U 2726 ST PATRICK AV GRAND ISLAND, NE o iases Checked:  ONLY: Positive nnot be the support of ATE PATROL #:N5126134  ACTION DATA AVAILABE TATE DEPARTMENT OF	REQUEST PERCY & NICOLLE UPTON 2726 ST PATRICK AVE GRAND ISLAND, NE 68803 (See Attach iases Checked: SSN 418962  ONLY: Positive nnot be the support of ATE PATROL #:N5126134  ACTION DATA AVAILABLE FROM: TATE DEPARTMENT OF MOTOR 9	UPTON, NICOLLE 508171510  REQUESTING AGENCY/ PERCY & NICOLLE UPTON 2726 ST PATRICK AVE GRAND ISLAND, NE 68803 (See Attached Nebraski iases Checked:  SSN 418962  ONLY: Positive Innot be Ithe support of ATE PATROL #:N5126134  ACTION DATA AVAILABLE FROM: TATE DEPARTMENT OF MOTOR 9	UPTON, NICOLLE  508171510  Complete Date  REQUESTING AGENCY/INDIVIDUAL  PERCY & NICOLLE UPTON  2726 ST PATRICK AVE  GRAND ISLAND, NE 68803  (See Attached Nebraska Rap Sheet iases Checked:  SSN  418962  ONLY: Positive Innot be the support of ATE PATROL  #:N5126134  ACTION DATA AVAILABLE FROM:  ATE DEPARTMENT OF MOTOR  9					

Lt. John J. Shelton, CID

Nebraska State Patrol Employee Signature



NEBRASKA STATE PATROL CRIMINAL IDENTIFICATION

P.O. BOX 94907 LINCOLN, NEBRASKA 68509

THESE (THIS) ARE (IS) THE ONLY RECORD(S) IN OUR FILES MEETING STATUTORY RÉQUIREMENTS FOR RELEASE. FURTHER INFORMATION ON ARREST RECORD SHOULD BE OBTAINED FROM NOTE: MINOR TRAFFIC INFRACTIONS NOT INCLUDED. COURT SYSTEM(S).

PCH032RS

NEBRASKA CRIMINAL HISTORY

PAGE 01

BECAUSE ADDITIONS OR DELETIONS MAY BE MADE AT ANY TIME, A NEW COPY SHOULD BE REQUESTED WHEN NEEDED FOR SUBSEQUENT USE. WHEN EXPLANATION OF AN ARREST OR DISPOSITION IS NEEDED, COMMUNICATE DIRECTLY WITH THE AGENCY THAT CONTRIBUTED THE FINGERPRINTS.

NAME HUBEL, NICOLE M FEL STATE ID N NB418962 FBI NO.

DATE REQUESTED 10/06/2006

DATE OF BIRTH RACE 05/01/1971 F W

DATE DECEASED

HEIGHT 5 06

EYES WEIGHT BRO 110

HAIR BRO

PLACE OF BIRTH NEBRASKA

PLACE OF CITIZENSHIP UNITED STATES OF AMERICA NCIC FINGERPRINT 00 00 00 00 00 00 00 00 00 00

SKIN XXX

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* "INFRCTN" - MEANS "INFRACTION" WHICH IS A VIOLATION OF ANY LAW, ORDINANCE, ORDER, RULE OR REGULATION THAT IS NOT A MISDEMEANOR, FELONY, OR TRAFFIC OFFENSE.

ADDITIONAL IDENTIFIERS:

ALIAS HUBEL, NICOLE M RACE

DATE OF BIRTH 05/01/1971

SOCIAL SECURITY NUMBER

508 17 1510

(NB040013J)

ARREST 01\* \* \* \*08/11/1991\* \* \* \*

DCN 795843

(NB0400000)

AGENCY-HALL CO SO CASE NUMBER- 91-0686

NAME USED-HUBEL, NICOLE M

CHARGE 5404 DRIVING UNDER INFLUENCE LIQUOR(1)

CHARGE 4122 MINOR IN POSSESSION LIQUOR(1)

-MISDMNR

-MISDMNR

COURT-COUNTY COURT HALL

COURT DISP DATE-10/28/1991

DOCKET-

-MISDMNR

CHARGE 5404 DRIVING UNDER INFLUENCE LIQUOR(1)

DISPOSITION-GUILTY BY CONVICTION SENTENCE-PROBATION 12 MONTHS COURT COSTS

OTHER COURT PROVISION-60 DAY SUSPENSION

EMPLOYEE SIGNATURE

### Nebraska State Patrol

# Criminal History Record Dissemination Form



			CRIMINAL HISTO	RY				
Name	UPTON, PERCY			D.O.B.	02/19/1960			
S.S.N.	505840736		Complete Date	10/06/2006				
		REQUEST	TING AGENCY	/INDIVIDUAL				
Name	PERCY & NICOLLE UPTON							
Address	2726 ST PATRICK A	KAVE						
City/State/Zip	GRAND ISLAND, NE							
		(See Attach	ned Nebrasi	ka Rap Sheel	t)			
Additional Al	iases Checked:							
Name		SSN						
PETE, PETER		299537	299537					
, , , , , , , , , , , , , , , , , , , ,		1	444					
NAME CHECK Identification cal effective without finger print. NEBRASKA ST	nnot be the support of ATE PATROL							
NSP Receipt	#:N5126134		_					
NOTE: TRAFFIC INFRACTION DATA AVAILABLE FROM: NEBRASKA STATE DEPARTMENT OF MOTOR VEHICLES P.O. BOX 94789				NEBRASKA STATE PATROL RECORDS & IDENTIFICATION DIVISION P.O. BOX 94907 LINCOLN, NEBRASKA 68509-4907				
LINCOLN, NEBRASKA 68509			1	by				

Lt. John J. Shelton, CID
Nebraska State Patrol Employee Signature



NEBRASKA STATE PATROL CRIMINAL IDENTIFICATION

P.O. BOX 94907 LINCOLN, NEBRASKA 68509

THESE (THIS) ARE (IS) THE ONLY RECORD(S) IN OUR FILES MEETING STATUTORY REQUIREMENTS FOR RELEASE. FURTHER INFORMATION ON ARREST RECORD SHOULD BE OBTAINED FROM NOTE: MINOR TRAFFIC INFRACTIONS NOT INCLUDED. COURT SYSTEM(S).

PCH032RS

# NEBRASKA CRIMINAL HISTORY

PAGE 01

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NAME UPTON, PERCY L FEL STATE ID N NB299537

FBI NO.

DATE REQUESTED

10/06/2006

RACE SEX

DATE OF BIRTH

DATE DECEASED

HEIGHT 6 01

EYES

HAIR BRO

M PLACE OF BIRTH

02/19/1960

PLACE OF CITIZENSHIP

NCIC FINGERPRINT 24 TT 18 CI 18 16 13 19 22 17

SKIN XXX

NEBRASKA

UNITED STATES OF AMERICA

WEIGHT

195

\* "INFRCTN" - MEANS "INFRACTION" WHICH IS A VIOLATION OF ANY LAW, ORDINANCE, ORDER, RULE OR REGULATION THAT IS NOT A MISDEMEANOR, FELONY, OR TRAFFIC OFFENSE.

ADDITIONAL IDENTIFIERS:

ALIAS UPTON, PERCY L RACE

DATE OF BIRTH 02/19/1960

SOCIAL SECURITY NUMBER

505 84 0736

ARREST 01\* \* \* \*05/29/1993\* \* \* \*

DCN 447290 (NB0400000)

(NB040013J)

AGENCY-HALL CO SO

CASE NUMBER-

NAME USED-UPTON, PERCY L CHARGE 1399 (DOM VIOL) 3RD DEGREE ASSAULT(1)

-MISDMNR-1

COURT-COUNTY COURT HALL

COURT DISP DATE-06/18/1993

DOCKET-

CHARGE 1399 (DOM VIOL) 3RD DEGREE ASSAULT(1)

DISPOSITION-COURT DISMISSAL

SENTENCE- COURT COSTS

-MISDMNR-1

EMPLOYEE SIGNATURE